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-19N 3711

TRANG	ITTAL F		Application No.	10	/500,779		
IKAN	HIALF	ORIVI	Filing Date	Se	ptember 21, 2004		
(to be used for all correspondence after initial filing)				First Named Inventor	Jer	ry Iggulden	
				Art Unit	37	11	
				Examiner Name	W	ong, Steven B.	
Total Number of	Pages	in This Submission	on 8	Attorney Docket Number	er 42	438P062	
		ENCLO	SURES (ched	ck all that apply)			
Fee Transmittal	_			Drawing(s)		After Allowance Communication to TC	
Fee Attac	hed		Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences	
Amendment / Re	Amendment / Response			Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
1 =	After Final Affidavits/declaration(s)			Petition to Convert a Provisional Application		Proprietary Information	
Extension of Tim	Extension of Time Request			Power of Attorney, Revocation Change of Correspondence Address		Status Letter	
Express Abandonment Request			Terminal Disclaimer			Other Enclosure(s) (please identify below):	
Information Disc	Information Disclosure Statement			Refund		Return Receipt Postcard	
PTO/SB/0	08		CD, Number	er of CD(s)			
Certified Copy of Document(s)	Certified Copy of Priority Document(s)			cape Table on CD			
Response to Mis Incomplete Appl	ssing Pication	Parts/	Remarks		L		
Basic Filing Fee  Declaration/POA  Response to Missing Parts under 37 CFR 1.52 or 1.53			In the event that an extension of time is required to prevent this application from being abandoned or any other fee is deemed to be due, authorization is hereby given to charge the appropriate fee to Deposit Account No. 02-2666.				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm	G						
<i>or</i> Individual name	George W Hoover, Reg. No. 32,992  BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP					N LLP	
Signature							
Date August 17, 2006							
CERTIFICATE OF MAILING/TRANSMISSION  I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.							
Typed or printed name Suzanne			instor			<u> </u>	
Signature					Date	August 17, 2006	

O. P. E. 40 P. 1 7006 P. 1	
for FY 200 Patent fees are subject to annual re	5
Applicant claims small entity status. Se	e 37 C
TOTAL AMOUNT OF PAYMENT	(\$)

AL	Complete if Known				
AL	Application Number	10/500,779			
	Filing Date	September 21, 2004			
	First Named Inventor	Jerry Iggulden			
CFR 1.27.	Examiner Name	Wong, Steven B.			
	Art Linit	3711			

Total Claims	TOTAL AMOUNT OF PAYMENT	(\$) 225.00	Art Unit Attorney Docket No.	42438P062				
Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Scharge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Credit any overpayments  Indicated below, except for the filing fee  Indicated below, except for the filing fee or over sheat.  Indicated below, except for the filing fee or over sheat.  Indicated below, except for the filing fee or over sheat.  Indicated below, except for the filing fee or over sheat.  Indicated below, except for the filing fee or over sheat.  Indicated below, except for the filing fee or over sheat.  Indicated below, except for the	METHOD OF PAYMENT (check a	METHOD OF PAYMENT (check all that apply)						
Total Claims	<ul> <li>Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):</li></ul>							
Total Claims    A	FEE CALCULATION							
Fee   Fee   Code   (\$)   Code   Fee   Code   Code   Fee   Code   Code   Fee   Code   Code   Fee   Code	Total Claims							
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	1052 50 2052 25 Surcharge - late 2053 130 2053 130 Non-English sp 1251 120 2251 60 Extension for re 1252 450 2252 225 Extension for re 1253 1,020 2253 510 Extension for re 1254 1,590 2254 795 Extension for re 1255 2,160 2255 1,080 Extension for re 1401 500 2401 250 Notice of Appear 1402 500 2402 250 Filing a brief in 1403 1,000 2403 500 Request for ora 1451 1,510 2451 1,510 Petition to instit 1460 130 2460 130 Petitions to the 1807 50 1807 50 Processing fee 1806 180 1800 Submission of 1809 790 1809 395 Filing a submission 1810 790 2810 395 For each additional 2250 Submission of 1809 790 2810 395 For each additional 2250 2251 2350 2350 2350 2350 2350 2350 2350 2350	e filing fee or oath e provisional filing fee or cover sheet ecification apply within first month apply within second month apply within third month apply within fourth month apply within first month all a support of an appeal It hearing ute a public use proceeding Commissioner under 37 CFR 1.17(q) Information Disclosure Stmt sion after final rejection (37 CFR § 1.	129(a))	225.00				
	SUBMITTED BY	335101AL (2)	- <del> </del>	Complete (if applicable)				